

JONATHAN E. FIELDING, M.D., M.P.H. Director and Health Officer

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June 14, 2007

TO:

Each Supervisor

FROM:

/ Jonathan E. Fielding, M.D., M.P.H. WAL WUW

Director and Health Officer

SUBJECT:

NOTIFICATION OF DEPARTMENT OF PUBLIC HEALTH'S USE OF DELEGATED AUTHORITY TO SIGN STANDARD AGREEMENT

AMENDMENT BETWEEN THE COUNTY'S DEPARTMENT OF PUBLIC

HEALTH'S CHILDHOOD LEAD POISONING PREVENTION

PROGRAM (CLPPP) AND THE CALIFORNIA DEPARTMENT OF

HEALTH SERVICES (CDHS)

This is to advise you that the Department of Public Health will exercise its delegated authority, as approved by the Board of Supervisors on August 2, 2005, to accept additional funding in the amount of \$41,128 for Fiscal Year 2006-07.

The Standard Agreement Amendment with the CDHS reflects a Fiscal Year 2006-07 budget modification that incorporates union negotiated salary adjustments, and other line item adjustments, at no charge to the County.

County Counsel has reviewed and approved the Standard Agreement Amendment as to form.

If you have any questions or require additional information, please let me know.

JEF:at CLPPPDELEGATE-BOS.doc Attachment(s)

c: Chief Administrative Officer County Counsel Executive Officer, Board of Supervisors STATE OF CALIFORNIA STANDARD AGREEMENT AMENDMENT STD 213 A (DHS Rev 3/07) Agreement Number Amendment Number Check here if additional pages are added: 1 Page(s) A01 05-45144 Registration Number: 1. This Agreement is entered into between the State Agency and Contractor named below: (Also referred to as CDHS, DHS, or the State) State Agency's Name California Department of Health Services Contractor's Name (Also referred to as Contractor) Los Angeles County 2. The term of this 07/01/05 through 06/30/08 Agreement is: 3. \$ 13,901,896 The maximum amount of this Agreement after this amendment is: Thirteen Million Nine Hundred-One Thousand, Eight Hundred Ninety-Six Dollars The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part 4. of the Agreement and incorporated herein: 1. Amendment effective date: 07/01/06 Purpose of amendment: This amendment reflects a \$41,128 increase in the budget for Year 2. The changes 11. reflect an increase in salaries and benefits, as a result of a raise received by the Contractor's staff. CDHS is continuing to receive more of the same services as shown in the original agreement. Certain changes made in this amendment are shown as: Text additions are displayed in bold and underline. Text deletions are displayed as strike through text (i.e., Strike). IV. Paragraph 3 (maximum amount payable) on the face of the original STD 213 is increased by \$41,128, and is amended to read: \$13,860,768 (Thirteen Million Eight Hundred Sixty Thousand, Seven Hundred Sixty-Eight Dollars) \$13,901,896 (Thirteen Million Nine Hundred-One Thousand, Eight Hundred Ninety-Six Dollars, Paragraph 4 (Incorporated Exhibits) on the face of the original STD 213 is amended to add Exhibit B,

V. Paragraph 4 (Incorporated Exhibits) on the face of the original STD 213 is amended to add Exhibit B, Attachment II A1. All references to Exhibit B, Attachment I, II, and III in any exhibit incorporated into this agreement shall hereinafter be deemed to read Exhibit B Attachment I, II A1, and III respectively.

(Continued on next page)

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agre	eement has	been executed by	the parties	nereto.	
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CALIFORNIA CONTRACTOR Department of General Services Use Only Contractor's Name (If other than an individual, state whether a corporation, partnership, etc.) Los Angeles County Date Signed (Do not type) By(Authorized Signature) 6-15-07 Printed Name and Title of Person Signing John Schunhoff, PH.D., Chief of Operations, Public Health C/O Angie Toyota, Los Angeles CLPPP,5555 Ferguson Drive., Room #210-02, Commerce, CA, 90022 STATE OF CALIFORNIA Agency Name California Department of Health Services By (Authorized Signature) Date Signed (Do not type) Printed Name and Title of Person Signing Exempt per: Allan Chinn, Chief, Contracts and Purchasing Services Section Address 1501 Capitol Avenue, Room 71.2101, MS 1403, P.O. Box 997413 Sacramento, CA 95899-7413

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- VI. Provision 4 (Amounts Payable) of Exhibit B Budget Detail and Payment Provisions is amended to read as follows:
 - 4. Amounts Payable
 - A. The amounts payable under this agreement shall not exceed:
 - 1) \$4,674,405 for the budget period of 7/1/05 through 6/30/06
 - 2) \$4,626,553 \$4,667,681 for the budget period of 7/1/06 through 6/30/07
 - 3) \$4,559,810 for the budget period of 7/1/07 through 6/30/08
 - B. Reimbursement shall be made for allowable expenses up to the amount annually encumbered commensurate with the State fiscal year in which services are performed and/or goods are received.
 - C. The Contractor must maintain records reflecting actual expenditures for each state fiscal year covered by the term of this agreement.
 - VII. All other terms and conditions shall remain the same.

Exhibit B Attachment II A1 Budget (Year 2) (7/01/06 Through 6/30/07)

	· · ·	Medi-Cal Lead Program				
Original Budget	Primary Contract	PHN Case Mgt Services	Administrative Non-Enhanced		Total Original Budget	
Personnel	934,375	373,901	1,199,268	315,750	2,823,294	
Fringe Benefits (43.7957%)	404,385	158,375	495,184	136,672	1,194,616	
Indirect Costs (13.45% of Personnel & Fringe)	124,903	48,638	158,495	0	332,036	
Indirect Costs associated with Enhanced (13.45%)	0	. 0	41,973	0	41,973	
Operating Expenses	54,195	14,259	79,180	0	147,634	
Equipment	0	0	. 0	0	0	
Travel	9,996	0	20,004	0	30,000	
Subcontracts	10,000	0	0	. 0	10,000	
Other Costs	47,000	0	0	. 0	47,000	
	1,584,854	595,173	1,994,104	452,422	4,626,553	

Budget Changes		Medi-Cal Lead Program			
	Primary	PHN Case Mgt	Administrative Activities		Total Budget
	Contract	Services	Non-Enhanced	Enhanced	Changes
Personnel	(190,008)	(84,554)	801	(8,023)	(281,784)
Fringe Benefits	(53,466)	(22,027)	55,077	8,955	(11,461)
Indirect Costs	54,958	21,246	129,980	0 -	206,184
Indirect Costs associated with Enhanced	0	0	32,667	0	32,667
Operating Expenses	108,691	(14,259)	(18,066)	. 0	76,366
Equipment	24,756	0	0	0	24,756
Travel	20,004	0	(20,004)	0	0
Subcontracts	(10,000)	0	Ò	0	(10,000)
Other Costs	4,400	0	0	0	4,400
Total:	(40,665)	(99,594)	180,455	932	41,128

		Medi-Cal Lead Program]
Amended Budget	Primary Contract	PHN Case Mgt Services	Administrative Non-Enhanced		Total Amended Budget
Personnel	744,367	289,347	1,200,069	307,727	2,541,510
Fringe Benefits (47.4026%)	350,919	136,348	550,261	145,627	1,183,155
Indirect Costs (24.2958% of Personnel & Fringe)	179,861	69,884	288,475	0	538,220
Indirect Costs associated with Enhanced (24.2958%)	0	0	74,640	0	74,640
Operating Expenses	162,886	0	61,114	0	224,000
Equipment	24,756	0	0	0	24,756
Travel	30,000	0	0	0	30,000
Subcontracts	. 0	0	0	0	0
Other Costs	51,400	. 0	0	0	51,400
	1,544,189	495,579	2,174,559	453,354	4,667,681